## FORM D

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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 RECEIVED

FORM D

MAR 1 0 2003

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OMB APPROVAL

W 2003

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix	Serial						
DATE RECEIV	'ED						
I	<u> </u>						

Name of Offering ( check if this is an amer Nimesa Corporation 2003 Common Stock	ndment and name has changed, and indicate change.)  Offering	
Filing Under (Check box(es) that apply): ⊠ R Type of Filing: ⊠ New Filing □A	ule 504  Rule 505  Rule 506  Section 4(6	D) ULOE PROCESSED
	A. BASIC IDENTIFICATION DATA	( MAR 1 1 Zuus
1. Enter the information requested about the i	ssuer	THOMSON
Name of Issuer ( check if this is an amenda Nimesa Corporation	ment and name has changed, and indicate change.)	FINANCIAL
Address of Executive Offices 871 Islington Street, Portsmouth, New Ha	(Number and Street, City, State, Zip Code) mpshire 03801	Telephone Number (Including Area Code) (603) 431-6660
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business: Design, development, marketing and sales	QSR customer self-serve order entry system.	
Type of Business Organization		
<ul><li></li></ul>	☐ limited partnership, already formed☐ limited partnership, to be formed☐	other (please specify):
Actual or Estimated Date of Incorporation or	0 1 0 3	☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation for Sta CN for Canada; FN for other foreign jurisdiction)	D E

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC DEN	TIFICATION DATA		Section 1997 Secti
2. Enter the information requested for the following:			
<ul> <li>Each promoter of the issuer, if the issuer has been organized with</li> <li>Each beneficial owner having the power to vote or dispose, or dissuer;</li> <li>Each executive officer and director of corporate issuers and of content is the power to vote or dispose, or dissuer;</li> <li>Each executive officer and director of corporate issuers and of content is the power to vote or dispose.</li> </ul>	irect the vote or disposition of, 1		
Check Box(es) that Apply:  Promoter Beneficial Owner			General and/or Managing Partner
Full Name (Last name first, if individual)  Dev, Roger			
Business or Residence Address (Number and Street, City, State, Zip Code) 871 Islington Street, Portsmouth, New Hampshire 03801		- harring	
Check Box(es) that Apply:   Promoter   Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Samber, Mark			
Business or Residence Address (Number and Street, City, State, Zip Code) 871 Islington Street, Portsmouth, New Hampshire 03801	,,,,,,,		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)  Benson, Larry			
Business or Residence Address (Number and Street, City, State, Zip Code 871 Islington Street, Portsmouth, New Hampshire 03801			
Check Box(es) that Apply:  Promoter Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)  Mihalchick, Larry			
Business or Residence Address (Number and Street, City, State, Zip Code 871 Islington Street, Portsmouth, New Hampshire 03801	)		
Check Box(es) that Apply:  Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code	)		
Check Box(es) that Apply:	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code			
Check Box(es) that Apply:	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code	)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В. І	NFORMA	TION ABO	UT OFFER	ING				
1.	Has the	issuer sold, (	or does the	issuer inten	d to sell, to	non-accred	ited investor	s in this offer	ing?				Yes No
					Answer als	o in Append	dix, Column	2, if filing un	ider ULOE.				
2.	What is	the minimur	n investm	ent that will	be accepted	d from any i	ndividual?	•••••					\$ <u>none</u> Yes No
3.	Does the	offering pe	rmit joint	ownership o	f a single u	nit?							🖾 🗀
4.	similar to be lis list the r	remuneration ted is an asso	n for sol ociated pe oroker or	icitation of rson or ago dealer. If	purchaser ent of a b more that	s in conne broker or d n five (5)	ection with lealer registe persons to	sales of sec ered with th	directly or incourities in the SEC and/e associated	ne offering or with a	. If a p	erson states,	
Full N/A		ast name fir	st, if indiv	idual)								***	
Bus	iness or F	Residence Ad	dress (Nu	mber and St	reet, City, S	State, Zip C	ode)	· · · · · · · · · · · · · · · · · · ·	,				
Nan	ne of Ass	ociated Brok	er or Deal	er			- <del></del>				<u> </u>		<del></del>
Stat	es in Wh	ch Person L	isted Has	Solicited or l	Intends to S	Solicit Purch	asers	, ,					
	(Check [AL] [IL] [MT] [RI]	"All States" [AK] [IN] [NE] [SC]	or check in [AZ] [IA] [NV] [SD]	ndividual Sta [AR] [KS] [NH] [TN]	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]
Full	Name (I	ast name fir	st, if indiv	idual)				<u></u> .					
Bus	iness or F	Residence Ad	ldress (Nu	mber and St	reet, City,	State, Zip C	ode)						
Nan	ne of Ass	ociated Brok	er or Deal	er									
Stat	es in Wh	ch Person L	isted Has	Solicited or	Intends to S	Solicit Purch	iasers					<u>.</u>	
	(Check [AL] [IL] [MT] [RI]	"All States" [AK] [IN] [NE] [SC]	or check in [AZ] [IA] [NV] [SD]	ndividual Sta [AR] [KS] [NH] [TN]	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]
Full	Name (I	ast name fir	st, if indiv	idual)			**-						
Bus	iness or I	Residence Ad	ddress (Nu	mber and St	treet, City,	State, Zip C	ode)						
Nar	ne of Ass	ociated Brol	cer or Dea	ler	<del></del>			·					
Stat	es in Wh	ich Person L	isted Has	Solicited or	Intends to S	Solicit Purch	nasers				***	-	
	(Check [AL] [IL] [MT] [RI]	"All States" [AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	ndividual St [AR] [KS] [NH] [TN]	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	. All States [ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and	PRU	JCEED2		<u>6. 3.</u>	
	indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		A	amount Already Sold
	Debt	\$	0		\$	0
	Equity - Shares Common Stock	s —	232,400		s —	232,400
	✓ Common ☐ Preferred	-		_	~	
	Convertible Securities (including warrants)	\$_	0	_	\$	0
	Partnership Interests	\$	0		<b>\$_</b>	0
	Other	\$	0	_	<b>\$</b>	0
	Total	\$	232,400		\$	232,400
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number			Aggregate Dollar Amount
			Investors			of Purchases
	Accredited Investors		5	_	\$_	121,800
	Non-accredited Investors		4	_	\$_	110,600
	Total (for filings under Rule 504 only)		9	_	\$_	232,400
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of Offering		Type of Security			Dollar Amount Sold
	Rule 505		None	_	\$_	0
	Regulation A		None		\$_	0
	Rule 504		None		\$	00
	Total		None		\$_	00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$_	
	Printing and Engraving Costs				\$_	
	Legal Fees			$\boxtimes$	\$_	3,500
	Accounting Fees				\$	
	Engineering Fees				<b>\$</b> _	
	Sales Commissions (specify finders' fees separately)				\$_	
	Other Expenses (identify)				\$_	
	Total			$\boxtimes$	\$_	3,500
	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."				\$_	228,900

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

<ol> <li>Indicate below the amount of the adjusted gro of the purposes shown. If the amount for any to the left of the estimate. The total of the p issuer set forth in response to Part C - Question</li> </ol>	purpose is not known, furnish an estimation and an estimation and state of the stat	te and check the box		
			Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees			\$	_ 🗆 \$
Purchase of real estate			\$	_ 🗆 \$
Purchase, rental or leasing and installation	of machinery and equipment		\$	_ 🗆 \$
Construction or leasing of plant buildings	and facilities		\$	_ 🗆 \$
Acquisition of other businesses (including may be used in exchange for the assets or	the value of securities involved in this o securities of another issuer pursuant to a	ffering that merger)	\$	□ \$
Repayment of indebtedness			\$	
Working capital				<u> </u>
Other (specify):			\$	
Column Totals  Total Payments Listed (column totals add-			\$\$ \$\$_228	⊠\$ <u>228,900</u>
In a ssuer has duly caused this notice to be following signature constitutes an undertaking quest of its staff, the information furnished by the Issuer (Print or Type)  Nimesa Corporation	by the issuer to furnish to the U. issuer to any non-accredited investor pur	S. Securities and E suant to paragraph (b)	his notice is filed xchange Commission	
Name of Signer (Print or Type)  Mark Samber	Title of Signer (Print or Type) Treasurer			
Intentional misstatements or omiss	ATTENTION	al criminal viol	ntions. (See 18	U.S.C. 1001.)

<u> </u>	E. STATE SIGNATURE	
1	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes No □ ⊠

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Nimesa Corporation	Signature Date 3/6/03
Name of Signer (Print or Type) Mark Samber	Title of Signer (Print or Type) Treasurer

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL									:	
AK										
AZ										
AR										
CA										
СО										
СТ										
DE							_			
DC								_		
FL										
GA										
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA	<u> </u>						<u> </u>			
ME		X	Common Stock	1	\$10,000	0	0		х	
MD										
MA	Х		Common Stock	1	\$20,000	1	\$5,000		x	
MI										
MN										
MS										
МО										

<b>1</b>			And the second of the second o	APPEND	X			The second of th	การหลักสารเกาะสาย เกาะสหลักสารได้การการเกาะ เออสรรับ โดยชื่	
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT										
NE										
NV										
NH	х		Common Stock	3	\$166,800	3	\$30,600		х	
NJ										
NM										
NY										
NC										
ND										
ОН										
OK	_									
OR										
PA										
RI										
SC										
SD										
TN										
TX						_				
UT										
VT										
VA										
WA										
WV										
WI										
WY										
PR										